REISSUE PATENT APPLICATION TRANSMITTAL

Address to:	Attorney Docket No.	740819-1052
Mail Stop Reissue	First Named Inventor	Yoshihisa NAGANO et al.
Commissioner for Patents	Original Patent Number	6,441,420
P.O. Box 1450	Original Patent Issue Date (Month/Day/Year)	August 27, 2002
Alexandria, VA 22313-1450	Express Mail Label No.	

APPLICATION FOR REISSUE OF: ☒ *Utility Patent* ☐ *Design Patent* ☐ *Plant Patent*
(Check applicable box)

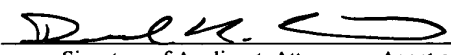| APPLICATION ELEMENTS (37 CFR 1.173)	ACCOMPANYING APPLICATION PARTS
1. ☒ Fee Transmittal Form *(PTO/SB/56)* (Submit an original, and a duplicate for fee processing)	10. ☐ Statement of status and support for all changes to the claims. See 37 CFR 1.173(c).
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.	11. ☐ Original U.S. Patent for surrender
3. ☒ Specification and Claims in double column copy of patent format *(amended, if appropriate)*	☐ Ribboned Original Patent Grant
4. ☒ Drawing(s) *(proposed amendments, if appropriate)*	☐ Statement of Loss (PTO/SB/55)
5. ☒ Reissue Oath/Declaration (original or copy) *(37 C.F.R. § 1.175) (PTO/SB/51 or 52)*	12. ☐ Foreign Priority Claim *(35 U.S.C. 119) (If applicable)*
6. ☐ Power of Attorney	13. ☒ Information Disclosure ☐ Copies of Statement (IDS)/PTO-1449 Citations
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No *(If Yes, check applicable box(es))* ☒ Written Consent of all Assignees *(PTO/SB/53)* ☒ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)	14. ☐ English Translation of Reissue Oath/Declaration *(If applicable)*
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table	15. ☒ Preliminary Amendment
9. Nucleotide and/or Amino Acid Sequence Submission *(If applicable, all of the following are necessary)*	16. ☒ Return Receipt Postcard *(MPEP 503) (Should be specifically itemized)*
a. ☐ Computer Readable Form (CFR)	17. Other: (1) Application Data Sheet
b. Specification Sequence Listing on:	(2) Declaration by the Assignee
i ☐ CD-ROM (2 copies) or CD-R (2 copies); **or**	
ii ☐ paper	
c. ☐ Statements verifying identity of above copies	

18. CORRESPONDENCE ADDRESS

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NAME (Print/Type)	Donald R. Studebaker	Registration No. (Attorney/Agent)	32,815
Signature		Date	April 22, 2004

NVA294097.1

REISSUE APPLICATION FEE TRANSMITTAL FORM							Docket Number: 740819-1052	

Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application		(3) Number Extra	Small Entity			Other than a Small Entity	
					Rate	Fee		Rate	Fee
(A) 7	Total Claims (37 CFR 1.16(j))	(B) 7		**** 0 =	X $____ =		or	X $____ =	
(C) 1	Independent claims (37 CFR 1.19(i))	(D) 1		* 0 =	X $____ =			X $____ =	
					Basic Fee (37 CFR 1.16(h)) $_____				$770.00
					Total Filing Fee $			OR	$

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity			Other than a Small Entity	
					Rate	Fee		Rate	Fee
Total Claims (37 CFR 1.16(j)	*** 7	MINUS	** 20	* = 0	X $_____ =			X $____ =	
Independent Claims (37 CFR 1.16(j))	*** 1	MINUS	***** 3	= 0	X $____ =			X $____ =	
				Total Additional Fee	$			OR	$

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.

☒ Please charge Deposit Account No. 19-2380 (740819-1052) in the amount of 770.00. A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 19-2380.
A duplicate copy of this sheet is enclosed.

☐ A check in the amount of $_____ to cover the filing / additional fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

April 22, 2004
Date

Signature of Applicant, Attorney or Agent of Record

Donald R. Studebaker
Typed or printed name